	Effe	ective Oc	tober 1, 20	003				09/	190	13,	531
CLAIMS AS FILED - PART I (Column 1) (Column 2)					olumn 2)		SMALI TYPE	ENTITY	OTHER THAN R SMALL ENTITY		
TOTAL GLAIMS							RATI	FE	E	RATI	FEE
FOR		NUMB	NUMBER FILED		NUMBER EXTRA		BASIC F	EE 385.	00 C	R BASIC F	EE 770.00
TOTAL CHARGEABLE CLAIMS			minus 20=		•		XS 9:	<u> </u>		R X\$18:	=
INDEPENDENT CLAIMS			minus 3 =				X43=		-1	R X86=	
MULTIPLE DEPE	PRESENT				1	 	-		<u></u>		
If the difference	s less than	less than zero, enter "0" in column 2			J	+145=		\dashv°			
						C.	TOTAL		ا-		R THAN
1/10/05	L.	SMAL	LENTIT	OF		LENTITY					
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+145=		OR	+290=	
						L	TOTAL		OR	TOTAL	
LISIOS	(Column 1)		(Column	າ 2)	(Column 3)	. <i>P</i>	IDDIT. FEE	·		AUDII. FEE	<u> </u>
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. 1.			•			L	TOTAL	(-)	4 (TOTAL ADDIT. FEE	-
10/06	(Column 1)		(Column	21	(Column 3)	Αľ	DIT. FEE Î	<u> </u>	1 0	ADDIT. FEE	
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
the entry in column 1 is less than the entry in column 2, write "0" in column 3.						Ľ	145=		OR	+290=	
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEEOR ADDIT.											
he "Highest Numbe	r Previously Paid	For (Total or	Independent) i	s the h	ighest number l	lound.	in the appr	opriate box	in colu	mn-1,	· .

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